

JUN 26 2007

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FACSIMILE COVER SHEET

Deliver to: Kent Williams, USPTO Art Group: 2139
 Facsimile No.: (571) 273-8300 Date: June 26, 2007
 From: Brent E. Vecchia, Reg. No. 48,011
 Our Docket No.: 42P16632 Number of pages 15 including this sheet.
 Application No.: 10/643,678 Filing Date: 8/18/2003
 Docket Due Date(s): 6/26/2007

Enclosed are the following documents:

<input checked="" type="checkbox"/> Amendment: Response (11 pgs)	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Appeal Brief (pgs)	<input type="checkbox"/> Notice of Appeal (in duplicate)
<input type="checkbox"/> Application: (pgs) w/cover & abstract	<input type="checkbox"/> Petition for:
<input type="checkbox"/> Assignment & Cover Sheet (pgs)	<input type="checkbox"/> Request for Continued Examination (RCE)
<input checked="" type="checkbox"/> Certificate of Facsimile	<input type="checkbox"/> Reply Brief (pgs)
<input type="checkbox"/> Continued Prosecution Application (CPA)	<input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i)
<input type="checkbox"/> Declaration & POA (pgs)	<input type="checkbox"/> Request to Rescind Previous Nonpublication Request
<input type="checkbox"/> Drawings: sheets, figures	<input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter
<input type="checkbox"/> Extension of Time:	<input type="checkbox"/> Response to Written Opinion (pgs)
<input checked="" type="checkbox"/> Fee Transmittal (in duplicate)	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> IDS & PTO/SB/08 (pgs)	<input type="checkbox"/> Transmittal of Publication Fee Due
<input type="checkbox"/> Other:	<input checked="" type="checkbox"/> Transmittal Letter

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8A)

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Wendi Lou Rostan 6/26/2007
 Wendi Lou Rostan Date

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JUN 26 2007

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	10/643,678
		Filing Date	August 18, 2003
		First Named Inventor	Sundeep M. Bajikar
		Art Unit	2139
		Examiner Name	Kent Williams
Total Number of Pages in This Submission	15	Attorney Docket Number	42P16632

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Fax Cover Sheet</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Brent E. Vecchia, Reg. No. 48,011 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	<i>Brent E. Vecchia</i>
Date	June 26, 2007

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being submitted electronically via EFS Web on the date shown below.			
Typed or printed name	Wendi Lou Rostan		
Signature	<i>Wendi Lou Rostan</i>	Date	June 26, 2007

Based on PTO/SB/21 (09-04) as modified by Blakely, Sokoloff, Taylor & Zafman (ndc) 10/12/2006.
SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450

JUN 26 2007

**FEE TRANSMITTAL
for FY 2006**

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 250.00

Complete If Known

Application Number 10/643,678
 Filing Date August 18, 2003
 First Named Inventor Sundee M. Bajkar
 Examiner Name Kent Williams
 Art Unit 2139
 Attorney Docket No. 42P16632

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☒ Charge fee(s) indicated below ☒ Credit any overpayments
- ☐ Charge fee(s) indicated below, except for the filing fee ☒ Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.
- ☒ Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application.

FEE CALCULATION

1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
27	5	\$0.00	\$250.00
Independent Claims	3	0	\$0.00
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	
1202 50	2202 25	Claims in excess of 20
1201 200	2201 100	Independent claims in excess of 3
1203 360	2203 180	Multiple Dependent claim, if not paid
1204 790	2204 395	**Reissue independent claims over original patent
1205 300	2205 150	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (1)

(\$) 250.00

**or number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	
1051 130	2051 65	Surcharge - late filing fee or oath
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet
2053 130	2053 130	Non-English specification
1251 120	2251 60	Extension for reply within first month
1252 450	2252 225	Extension for reply within second month
1253 1,020	2253 510	Extension for reply within third month
1254 1,690	2254 795	Extension for reply within fourth month
1255 2,180	2255 1,080	Extension for reply within fifth month
1401 500	2401 250	Notice of Appeal
1402 500	2402 250	Filing a brief in support of an appeal
1403 1,000	2403 500	Request for oral hearing
1451 1,510	2451 1,510	Petition to institute a public use proceeding
1460 130	2460 130	Petitions to the Commissioner
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)
1808 180	1808 180	Submission of Information Disclosure Stmt
1809 790	1809 395	Filing a submission after final rejection (37 CFR § 1.128(a))
1810 790	2810 395	For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

SUBTOTAL (2)

(\$)

Fee Paid

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Brent E. Vecchia	Registration No. (Attorney/Agent)	48,011	Telephone	(303) 740-1980
Signature	<i>Brent E. Vecchia</i>	Date	06/26/07		

Based on PTO/SB/17 (02-07) as modified by Blakely, Sokoloff, Taylor & Zafman (W/1) 02/28/2007.
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

JUN 26 2007**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application No.	: 10/643,678	Confirmation No.	: 4611
1 st Named Inventor	: Sundeep M. Bajikar	Art Unit	: 2139
Filed	: August 18, 2003	Examiner	: Williams, Kent L.
Docket No.	: 42P16632	Customer No.	: 8791

RESPONSE TO OFFICE ACTION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed March 26, 2007, the Applicants respectfully request that the Examiner enter the following amendments and consider the following remarks.

CERTIFICATE OF TRANSMISSION (37 CFR 1.8A)

I hereby certify that this correspondence is, on the date shown below, being transmitted by facsimile to the Patent and Trademark Office.


Wendi Lou Rostan Date

06/27/2007 TL0111 00000034 022666 10643678
01 FC:1202 250.00 DA

App. No. 10/643,678
BEV/wlr

- 1 -

Dkt. No. 42P16632